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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)											
	Jared Polis (b) Address (number and street) P.O. Box 4659	☐ Check if address changed			2. Candidate's FEC Identification Number							
						H8CO02137	Mann		A			
	(c) City, State, and ZIP Code Boulder		C	0 803	306	3. Is This Statement	New (N) OR		Amended (A)			
4.	Party Affiliation	5. Office Soug	jht			trict of Candidate						
	DEMOCRATIC PARTY	House			СО	02						
	DE	SIGNATIO	N OF PR	RINCIPA	L CAMPAIGI	N COMMITTEE						
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 (year of election)											
	NOTE: This designation should be filed with the appropriate office listed in the instructions.											
	(a) Name of Committee (in full)											
	Friends of Jared Polis Committee											
	(b) Address (number and street) P.O. Box 4572											
	(c) City, State, and ZIP Code											
	Boulder				CO	80306						
	DE	SIGNATIO	N OF OT	HER A	JTHORIZED	COMMITTEES						
					ing Representativ							
<ol> <li>I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.</li> </ol>												
	NOTE: This designation should be f	iled with the pri	incipal camp	aign comm	ittee.							
_	(a) Name of Committee (in full)								-1			
	(b) Address (number and street)											
	(b) Address (number and street)											
									-1			
	(c) City, State, and ZIP Code											
	I certify that I have exa	mined this Sta	tement and t	o the best	of my knowledge s	and helief it is true, cor	rect and comple	oto				
		Tilliled tills Stat	ernem and to	U life best (			Tect and comple					
Signature of Candidate  Jared Polis  Date												
Ju	irea rous			[El	ectronically Filed]	05/08/2012						
N	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 / 3
DESIGNAT	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full)		
Fund for Equality		
(b) Address (number and street) PO Box 1174		
(c) City, State and ZIP Code		
Springfield	VA 22151	
DESIGNAT	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	hich is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full)		
Colorado Democratic Cong	gressional Committee	
(b) Address (number and street) PO Box 1174		
(c) City, State and ZIP Code		_
Springfield	VA 22151	
DESIGNAT	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, who candidacy.	nich is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full)		
Jared Polis Victory Fund 20	012	
(b) Address (number and street) PO Box 1174		
(c) City, State and ZIP Code		_
Springfield	VA 22151	

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 / 3
DESIGNA	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal campaign committee, to receive and expend funds on I	pehalf of my
NOTE: This designation should be filed with	n the principal campaign committee.	
(a) Name of Committee (in full)  Jared Polis Majority Fund	2012	
(b) Address (number and street) PO Box 1174		
(c) City, State and ZIP Code		
Springfield	VA 22151	
DESIGNA	ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal campaign committee, to receive and expend funds on	pehalf of my
NOTE:This designation should be filed with	h the principal campaign committee.	
(a) Name of Committee (in full)		_
Red to Blue Majority Fund	i	
(b) Address (number and street) PO Box 1174		
(c) City, State and ZIP Code		
Springfield	VA 22151	
DESIGNA	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, validacy.	which is NOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed with	h the principal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		